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INDICATION FORM**

Application Number	10/614,460
Filing Date	07/07/2003
First Named Inventor	Andrew A. Wolff
Title	Sustained Release Ranolazine Formulations
Art Unit	
Examiner Name	
Attorney Docket Number	045710-0139

I hereby revoke all previous powers of attorney given in the above-identified application.

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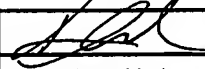
I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	Kevin A. Marks	Telephone	1.650 855.5100
Title and Company	Roche Palo Alto LLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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